

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

Rec'd
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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>12698</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / 2004 Through: <u>12</u> / <u>31</u> / 2004
3. Name and address of person filing. Name <u>James Hart</u> P.O. Box, Bldg., Room No., if any Street <u>328 Sleight Avenue</u> City <u>Staten Island</u> State <u>New York</u> ZIP Code + 4 <u>10307</u>	4. Name, file number, and address of labor organization. Name <u>United Association Journeymen and Apprentices</u> Labor Organization File Number <u>000-111</u> P.O. Box, Building and Room Number, if any Street <u>901 Massachusetts Ave. NW</u> City <u>Washington, D.C.</u> State <u>District of Columbia</u> ZIP Code + 4 <u>20001</u>
5. Position in labor organization. <u>Special Representative</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>Plumbing Cont. Association of Long Island</u> Trade Name, if any: P.O. Box, Bldg., Room No., if any Street <u>16 Lucinda Drive</u> City <u>Babylon</u> State <u>New York</u> ZIP Code + 4 <u>11702</u>	7.a. Nature of Interest, Transaction, or Income. <u>June 7, 2004</u> <u>Attended Industry golf outing at the invitation of the Association.</u> 7.b. Amount. <u>\$145</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

James Hart

On

8/15/2005

Date

718-227-5434

Telephone Number

Name of Person Filing James Hart

File Number U-

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name Plumbing Cont. Association of Long Island

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 16 Lucinda Drive

City Babylon

State New York

ZIP Code + 4 11702

7.a. Nature of Interest, Transaction, or Income.

June 10, 2004

Attended arbitration business dinner meeting with Association.

7.b. Amount.

\$35.

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name Association of Contracting Plumbers of NY

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 44 West 28th Street

City New York

State New York

ZIP Code + 4 10001

7.a. Nature of Interest, Transaction, or Income.

December 17, 2004

Attended Association sponsored holiday gathering with my wife (Rita).

estimated cost \$150 per person

7.b. Amount.

\$150

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

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P.O. Box, Bldg., Room No., if any

Street 44 West 28th Street

City New York

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